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PTO/SB/01 (3-97)

Approved for use through 6/30/98. OMB 0651-0032

Patent and Trademark Office; US DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		Attorney Docket No.		70078-0179			
		First Named Inventor		Andrew Capon			
		COMPLETE IF KNOWN					
		Application No.					
		Filing Date					
<input checked="" type="checkbox"/> Declaration submitted with or initial filing		<input type="checkbox"/> Declaration submitted after initial filing		Group Art Unit			
				Examiner Name			

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (only if one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MULTI-STAGE RESPIRATOR FILTER WITH TIM FILTER OPTION

(Title of the Invention)

the specification of which

☒ is attached hereto

or

☐ was filed on _____, as United States Application Number or PCT International Application Number: _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number (s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/198,012	04/18/00	

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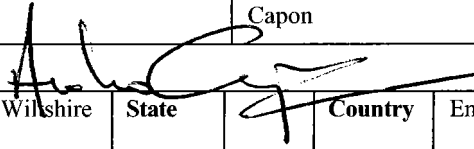


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DECLARATION - Utility Or Design Patent Application							
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the matter provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
U.S Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)			
10/257,801		10/15/2002					
	PCT/US01/12545	04/17/01					
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number 20915							
Or <input type="checkbox"/> Registered practitioner(s) name/registration number listed below							
<div style="border: 1px solid black; padding: 5px; text-align: center;">Place Customer Number Bar Code Label Here</div>							
Name		Registration No.		Name		Registration No.	
John E. McGarry		22,360		Mark A. Davis		37,118	
Joel E. Bair		33,356		G. Thomas Williams		42,228	
				Michael F. Kelly		50,859	
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.							
Direct all correspondence to <input checked="" type="checkbox"/> Customer Number				20915		or <input type="checkbox"/> Correspondence Address below	
or Bar Code Label							
Name	John E. McGarry, Reg. No. 22,360 McGarry Bair PC						
Address	171 Monroe Avenue, NW, Suite 600						
City, State, Zip	Grand Rapids, Michigan 49503						
Country	US	Telephone	616-742-3500		Fax	616-742-1010	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of Sole or First Inventor				<input type="checkbox"/> A petition has been filed for this unsigned inventor.			
Given Name (first and middle [if any])				Family Name or Surname			
Andrew				Capon			
Inventor's Signature						Dated <u>SEPT 13 2003</u>	
Residence: City	Salisbury, Wiltshire	State		Country	England	Citizenship	UK
Post Office Address	23 Ridgmount, Durrington						
City	Salisbury, Wiltshire	State		Zip	SP4 8AH	Country	UK
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental additional inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
David K.				Friday			
Inventor's Signature		<i>David K. Friday</i>				Dated June 27, 2003	
Residence: City	Timonium	State	MD	Country	US	Citizenship	US
Post Office Address		223 Castletown Rd.					
City	Timonium	State	MD	Zip	21093	Country	US

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Dated	
Residence: City		State		Country		Citizenship	
Post Office Address							
City		State		Zip		Country	

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
David W.				Pike			
Inventor's Signature		<i>David W. Pike</i>				Dated June 27, 2004	
Residence: City	Salisbury, Wiltshire	State		Country		Citizenship	
Post Office Address		106 Hannham Road					
City	Salisbury, Wiltshire	State		Zip	SP28JW	Country	UK

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Gary M.				Dunn			
Inventor's Signature						Dated	
Residence: City	Trowbridge, Wiltshire	State		Country	England	Citizenship	UK
Post Office Address		5 Shrewton Close					
City	Trowbridge, Wiltshire	State		Zip	BA140XS	Country	UK

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Dated	